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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the Application of:  
Walther B. PEDERSEN, et al.  
Serial No.: 09/926,756  
Filed: May 3, 2002

Group Art Unit: 3738  
Examiner: A.J. Stewart

For: PROSTHETIC DEVICE

TRANSMITTAL

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an **Amendment Under Rule 1.116 and Information Disclosure Statement** for filing in the above-captioned patent application.

The fee has been calculated as shown below:

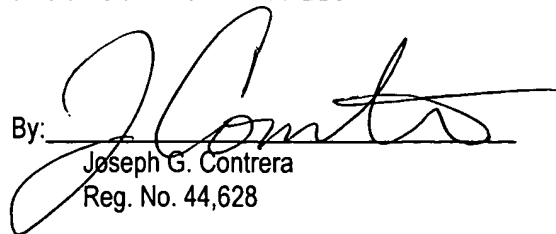
	Claims Remaining After Amendment	Highest Number Previously Paid For	Present Extra		Small Entity Rate Additional Fee	(or)	Other Than Small Entity Rate Additional Fee
Total Claims	62	- 63	=		x 25 = \$	x 50 =	\$
Ind. Claims	04	- 04	=		x100 = \$	x200 =	\$
<input type="checkbox"/> Multiple Dependent Claims					+180 = \$	+360 =	\$
				Total	\$	Total	\$

XXXX A credit card payment form in the amount of **\$180.00** is attached for:  
**Information Disclosure Statement**

XXXX If a Petition for Extension of Time is necessary and the Petition and/or the credit card payment form is not enclosed, this will act as the Petition and applicant herewith petitions the Commissioner to extend the time for response and charge any fees necessary under 37 CFR 1.17 (a)(1)-(5) to Deposit Account No. 06-1358. The Commissioner is also authorized to charge payment of any other additional fees associated with this communication or credit any overpayment to Deposit Account No. 06-1358. A duplicate copy of this sheet is attached.

Respectfully submitted,

JACOBSON HOLMAN PLLC

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HBJ:JGC:gm  
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